

State of California
Department of Health Services



GRAY DAVIS
Governor

March 24, 2003

CHDP Provider Information Notice No.: 03-03

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP)
PROGRAM PROVIDERS

SUBJECT: REVISED CHDP ELIGIBILITY DETERMINATION TABLE EFFECTIVE
APRIL 1, 2003

The enclosed CHDP Eligibility Determination Table revision is effective April 1, 2003. This table is only to be used by providers when determining whether the income and status given by the parent/guardian on the CHDP Eligibility form (DHS 4073) qualifies the patient for CHDP-reimbursed health assessments. The Eligibility Determination Table is to be used by your office staff to determine if the patient is eligible for a state-reimbursed health assessment examination. Please do not give the Eligibility Determination Table to the parent, guardian or patient when completing the CHDP eligibility form.

If you have any questions, please contact your local CHDP Program.

Original Signed by Maridee Gregory, M.D.

Maridee A. Gregory, M.D., Chief
Children's Medical Services Branch

Enclosures



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CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
ELIGIBILITY DETERMINATION TABLE

EFFECTIVE APRIL 1, 2003

Providers are required to ensure that the parent/guardian understands the questions on the CHDP Eligibility Information Form (DHS 4073) that relate to eligibility for a CHDP-reimbursed health assessment. Services provided to persons enrolled in a prepaid health plan where preventive health services are a covered benefit **MUST NOT BE BILLED TO CHDP**. Providers are not required to bill other health insurance carriers before billing CHDP for the history and physical examinations and immunizations.

Note: *Most infants under 13 months of age are eligible for full scope benefits under the Medi-Cal Program. Please have the family give their infant's date of birth to their Eligibility Worker or if the infant's mother did not have Medi-Cal at the time of the infant's birth, contact Eligibility with the local Department of Social Services to apply for Medi-Cal.*

Eligibility Criteria

1. Medi-Cal

All persons from birth through 20 years of age who are certified as eligible to receive Medi-Cal are eligible for periodic CHDP-reimbursed health assessments. Any subsequent diagnostic and treatment services needed by Medi-Cal eligible persons must be billed through the regular Medi-Cal system.

2. Non-Medi-Cal

All persons from birth through 18 years of age who are not certified Medi-Cal eligible are eligible for periodic CHDP state-reimbursed health assessments if they are from a family whose income is at or below the income specified for the size of the family unit on the Income Eligibility Determination table listed below. See CHDP Provider Manual, September 1992, Section 305.a.2., for information about diagnosis and treatment service reimbursement for these persons.

Income Eligibility Determination Table, Effective April 1, 2003*

Number of Persons In Family Unit	Annual	Monthly
1	\$17,960	\$1,497
2	24,240	2,020
3	30,520	2,544
4	36,800	3,067
5	43,080	3,590
6	49,360	4,114
7	55,640	4,637
8	61,920	5,160
9	68,200	5,684
10	74,480	6,207
More than 10	\$6,280 per additional family member	\$524 per additional family member

3. Head Start and State Preschool

Children attending Head Start and State Preschool programs are eligible for CHDP-reimbursed health assessments. (A CHDP Eligibility Information Form (DHS 4073) is not required for these persons.)

*Figures are 200% of the Federal Income Guidelines